



August 14, 2019

Web Announcement 1947

Attention Provider Type 63 (Residential Treatment Centers):

Submission Requirements for Claims with Prior Authorizations

To prevent potential underpayment issues, provider type 63 (Residential Treatment Centers, RTC) providers are urged to be aware of the following claim submission requirements:

- Claims with a prior authorization (PA) must be billed in chronological order.
- Each claim with a PA must be billed for dates from only one PA line detail and within one calendar month as illustrated in the example below:
 - On the first claim: January 11, 2019 through January 31, 2019
 - On the second claim: February 1, 2019 through February 28, 2019
 - On the third claim: March 1, 2019 through March 31, 2019
 - On the fourth claim: April 1, 2019 through April 10, 2019
 - On the fifth claim: April 11, 2019 through April 30, 2019
 - On the sixth claim: May 1, 2019 through May 31, 2019

From Date	To Date	Units	Remaining Units	Amount	Code
01/11/2019	04/10/2019	90	0	–	Revenue 0100-All Inclusive Rate (R&B + Ancillary)
04/11/2019	07/09/2019	90	0	–	Revenue 0100-All Inclusive Rate (R&B + Ancillary)
07/10/2019	10/07/2019	90	0	–	Revenue 0100-All Inclusive Rate (R&B + Ancillary)
10/08/2019	01/05/2020	90	0	–	Revenue 0100-All Inclusive Rate (R&B + Ancillary)

- Wait for successful processing of each claim prior to submitting the next chronological claim to allow claims to continue processing in date order.

The [Provider Type 63 Billing Guidelines](#) will be updated to include this information.